Application Number

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Application: **BEURSKENS, Frank** First Named Inventor 2165 Art Unit Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450. p05556us0 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: **Customer Number:** 22885 Firm or ems/libublylbnl Address Address 2lp State City Country Fax Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed, (Form PTO/SB/98). Attorney or Agent of record. Registration Number 30,643 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Typed or Printed MARK D. HANSING Name Signature Telephone 515-288-3667 Date February 16, 2004 actifd of the entire Interest or their representative(s) are required. Submit multiple NOTE: Signatures of all the inventors or assignees forms If more than one signature is required, see be Total of forms are submitted

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